1. Details of beneficiaries:	Children below 5 years of age which includes Children of CGHS beneficiaries as well as general public.
2. Types of Vaccination provided:	BCG/DPT/Polio/Hepatitis-B/ Measles/ MMR/TT/DT
3. Vaccination schedule:	The schedule given is as per the guidelines of Government of India, under the Universal Immunization coverage.

At birth-	BCG/Polio (O dose)/*Hepatitis B.
6 weeks	DPT/Polio (1st dose) *Hepatitis B (1st dose).
10 weeks	DPT/Polio (IInd dose)/*Hepatitis B. (IInd dose)
14 weeks-	DPT/Polio (IIIrd dose)/*Hepatitis B. (IIIrd dose)
9 months	Measles
15 months	*MMR
16-24	DPT/Polio (Booster does).
5 years	D T
10 years & 15 years	T T

5 doses of Vitamin A given at 9 months, 1 and half years, 2 years, 2 and half years and 3 years.

* Hepatitis B MMR are presently being given in Delhi only by the State Government of Delhi to all children as per the schedule mentioned above and is being supplied to CGHS also. This is yet to be included in the National Immunization schedule.

Sale of Banned Drugs

1934. SHRI RAMA SHANKER KAUSHIK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news-item captioned, 'Drugs banned even for animals abroad are sold here', which appeared in The Economic Times, dated the 24th December, 2002;

(b) if so, the details thereof; and

(c) the action taken by Government for the stoppage of such drugs in the mareket?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) to (c) Yes, Sir. Recent newspaper reports have alleged that drugs like Analgin, Terfenadine. Astemizole, Lynestenol, Phenylubutazone, Phenolphthalein, Piperazine, Furazolidone, Nitrofurazone, Droperidol and nimesulide are being marketed in the country;

However, these news report misleading. Drugs like Analgin and Furazolidone are currently used in large number of countries including many developed countries. There is no system of global banning of a drug. Certain drugs and formulation banned in some countries at time continue to be marketed in other countries. The decision to do so is normally based on risk assessment process which is influenced by a number of factors such as the disease pattern in a country, the varying reactions of certain ethnic groups in a given population to the drug and the availability of safer substitutes as well as the cost factor involved in the treatment of a particular disease. There is also the overall awareness that administration of any drug is not absolutely free from side effects or adverse reactions in a statistically insignificant minority of the population.

Setting up of Heavy Industries

1935. SHRI DWIJENDRA NATH SHARMAH: Will the Minister of HEAVY INDUSTRIES AND PUBLIC ENTERPRISES be pleased to State:

(a) the steps taken by Government for setting up of heavy industries in the different parts of the country particularly in the State of Assam keeping in view of increasing unemployment problem; and

(b) the details of fund earmerked for the same during the Ninth Plan and the funds proposed to be granted during the Tenth Plan?

THE MINISTER OF HEAVY INDUSTRIES AND PUBLIC ENTERPRISES (SHRI BALASAHEB VIKHE PATIL): (a) As far as setting up of Heavy Industries is concerned, since the non-strategic sector has been largely delicensed, the private sector is free to establish havy industry anywhere in the country including Assam.